North Regional Time Sensitive Emergency Committee (NRTSEC)

Meeting Minutes May 15, 2015

Opening

The regular meeting of the North Regional Time Sensitive Emergency Committee (NRTSEC) was called to order at 1000 on May 15, 2015 at Kootenai Health by Chris Way

Present

Chris Way, Julie Hoerner, Dominic Pomponio, Bill Holstein, Chris land, Ann Ealy, Mike McGahan, Wanda Wilkerson, Ken Mills, Ben Suttlemyre, Kevin Kavanaugh, Tom Nickol, Casey Meza, Ken Gramyk, Shelley Mattsen, Mike Taylor, Jamie Karambay, Ken Baker, Christian Surjean (via phone), Stu Willis (via phone)

Approval of Agenda

Motion to approve agenda by Jamie Karambay, seconded by Ben Suttlemyre . Approved unanimously.

Approval of Minutes:

Motion to approve minutes from 4/17/15 as written by Bill Holstein, seconded by Casey Meza. Approved unanimously.

Open Issues

- 1. TSE State-wide Meeting Update Chris Way
 - -The state council tabled the question that NRTSEC posed at our last meeting regarding a singular set of statewide data points for PI. Will be on top of agenda next time.
 - -Trauma Criteria discussed having a consistent set of criteria across the state. Varying levels of trauma activation are used across the state. Some facilities in the south of the state uses a 3 level activation system, most of the rest of the state uses 2 levels. Chris asked if the group had any opinion about setting activation criteria. Christian stated the there was a one person on the council who opposed standardization of activation criteria. Recommendation was made by the NRTSEC to standardize definition of trauma across the state by creating a statewide set of inclusion and exclusion criteria for trauma activation, with the responsibility for determining the response to the criteria placed in each Region's hands. Benefits for state-wide disaster, etc. ** Motion for Chris to write letter fromr NRTSEC to the State Council was made by Bill Holstein, seconded by Tom Nickol motion passed unanimously.

- -Trauma Bands discussed for use on each trauma patient, but currently no set way to define trauma. Chris asked the group's opinion about the ease of placing a trauma band to EMS, hospital, etc. Can it be integrated into EMRs to be abstracted. Should track the pt from the initial entry into the TSE system, all the way to the exit. The state council is looking for validation of this idea or another idea for tracking the patient through the system. Dr. Nickol asked how functional the Idaho Health Information Exchange would be for this, as an alternative to a band that can get cut off, or neglected to be applied. Casey states the IHDE is building, but not robust enough to produce data (probably 2 years down the road before it is functional enough to be beneficial for TSE). Ben states that in his experience in a couple of states, banding is applied sporadically, or with difficulty (multiples applied on multiple limbs or cut off and reapplied with another band number). The group asked Christian to look into what other states are doing for tracking and take that to the state council. Christian agreed and stated that the council has not made a decision on tracking yet.
- 2. TSE Program Update Christian Surjan (via phone) the state council finalized amended rules. Standards language has been redone to make it easier to read (no content changes). Rules will be published by July 1st, to match the intent of the law.

Met with Deputy Atty General this am regarding how to set up PI/QA in terms of discoverability, etc. Some guidelines will be coming out from the state within the month.

Old Business

- 1. Review QI points Chris stated at the State council meeting he and Casey raised the question regarding why each region was submitting their own data points. Dr. Morgan suggested standardizing a review of any death or any transfer, and requested discussion in the Region. NRTSEC discussion was that his suggestions were too broad and did not lend specificity to how that data would help us to decide if we were doing a good job with trauma. Is was the opinion of the NRTSEC that we would like a more standardized and specific approach.
- 2. Discuss role of Executive Committee tabled to a future meeting
- 3. Letters of Correspondence Chris presented a draft of 2 letters to send out, per the recommendation from the last meeting. No additional comments received.

New Business

Meeting Structure – Chris met with subcommittee chairs prior to this meeting and asked the group if it would be appropriate for the larger general group to meet every other month, and then the subcommittee groups would meet on the off month. And the subcommittee chairs would meet just prior to the general meeting and would have a report spot on the agenda every other month. It would be left up to the subcommittee chairs about where and how to meet. A motion for NRTSEC general meeting to meet every other month and subcommittees on the off month with reevaluation in 6 months was made by Jamie Karambay , seconded by Tom Nickol , motion passed. Subcommittee meetings will meet in June and General meeting July.

- 1. TSE Community Needs Assessment Education Committee will be taking on implementation of a community needs assessment as previously discussed in April (or March) meeting.
- 2. Subcommittee planning discussed above.

Other Business

Stu (via phone) asked if the Protocol/Policy subcommittee was planning on creating policy templates to be modified in each facility for better standardization. Casey states Orofino borrowed KH's trauma policies and is customizing them for a smaller hospital and recommends that Stu connect with Kelly(in Orofino) to view the scaled down policies. Dominic (P/P chair) will connect with Stu around this process.

Action Items for Next Meeting

- -subcommittee chairs will contact their teams regarding meeting in June
- -Chris to write the letter to the State Council regarding NRTSEC's recommendation to standardize trauma activation criteria.
- -Julie will send out KH's trauma activation criteria as well as samples from S. Idaho that Christian provided. Group to review prior to the next meeting.

Adjournment

Motion to adjourn by Casey, seconded by Wanda. Meeting was adjourned at 1121 by Chris Way. The next general meeting will be at **July 17**th at 10:00 in Kootenai Health Boardroom (Kootenai Services Building). Subcommittees will meet in June

Minutes respectfully submitted by:

Julie Hoerner, NRTSEC Secretary